

**PENNSYLVANIA TITLE XXI STATE PLAN
FACT SHEET**

Name of State Plan: **Pennsylvania (PA) CHIP**

Date State Plan Submitted: November 13, 1997

Date State Plan Approved: May 28, 1998

Date State Plan Effective: June 1, 1998

Date First Amendment Submitted: August 14, 1998

Date First Amendment Approved: October 29, 1998

Date First Amendment Effective: June 17, 1998

Date Second Amendment Submitted: December 9, 1999

Date Second Amendment Approved: March 7, 2000

Date Second Amendment Effective: September 1, 1999

Date Third Amendment Submitted: December 9, 1999

Date Third Amendment Approved: March 7, 2000

Date Third Amendment Effective: September 1, 1999

Date Fourth Amendment Submitted: September 22, 2000

Date Fourth Amendment Approved: December 18, 2000

Date Fourth Amendment Effective: September 1, 2000

Date Fifth Amendment Submitted: June 28, 2002

Date Fifth Amendment Approved: September 19, 2002

Background

- On May 28, 1998, Pennsylvania's Title XXI State Plan was approved, which expanded coverage to children within the existing Pennsylvania Children's Health Insurance Program (PA CHIP), implemented in May 1993.
- Pennsylvania is one of three States whose comprehensive benefit package was cited by Title XXI, section 2103(a)(3) as having sufficient coverage to meet the requirements for a State Children's Health Insurance Plan. PA CHIP's Title XXI program provided coverage to uninsured children through age 16 in families with incomes at or below 185 percent of the Federal Poverty Level (FPL).

Amendments

- The State's first amendment was approved on October 29, 1998, which expanded eligibility to children through the age of 18 with incomes at or below 200 percent of the FPL, eliminated cost sharing, and moved administration of the program to the Pennsylvania Insurance Department.
- The second amendment, approved on March 7, 2000, expanded the income eligibility by allowing a work expense deduction and day-care expenses to be subtracted from gross earnings. The State projected that an additional 16,000 would be enrolled in the program as a result of implementing this amendment.
- The third amendment, also approved on March 7, 2000, expanded the benefit package by including outpatient mental health services, disposable medical supplies, inpatient and outpatient substance abuse services, and rehabilitation services.
- The fourth amendment, submitted on September 22, 2000, expanded the benefit package to include prenatal care and pre-pregnancy family services and supplies.
- Pennsylvania submitted its fifth amendment on June 28, 2002. This amendment updates and amends the SCHIP State plan to indicate the State's compliance with the final SCHIP regulations.

Children Covered Under the Program

- The State reported that 141,163 children were ever enrolled in its program during Federal fiscal year 2001.

Administration

- In the original plan, PA CHIP was administered by the Commonwealth and overseen by a Management Team comprised of members of the Governor's cabinet. The first plan amendment moved program operation under the purview of the Pennsylvania Insurance Department.

Health Delivery System

- Managed care contracts cover most areas of the State. Less than 5 percent of enrollees in rural areas do not have access to managed care programs and are served through fee-for-service.

Health Benefits Package

- The benefit package is the existing PA CHIP benefit package that includes a full range of services. These services include: inpatient hospitalization up to 90 days; outpatient

services; physician services; surgical services with the exception of cosmetic surgery; clinic services; prescription drugs; laboratory and radiological services; inpatient mental health services up to 90 days; outpatient mental health services up to 50 visits per year; durable medical equipment and remedial devices; home and community-based health care services; nursing care services; abortion to save the life of the mother or if the pregnancy is the result of rape or incest; dental services; case management; physical, occupational, and speech therapy; hospice care; and ambulance services when medically necessary. Previous amendments added outpatient mental health services, disposable medical supplies, inpatient and outpatient substance abuse services, rehabilitation services, prenatal care and pre-pregnancy family services and supplies.

- Children are guaranteed a minimum 12 months of coverage.

Cost Sharing

- There is no cost sharing in the federally supported portion of PA CHIP. (There is cost sharing in the State-only part of PA CHIP.)

Crowd-Out Strategy

- The State monitors crowd-out by asking about private insurance coverage on the application and renewal form, and data matches are made against private insurance files. The data from these sources are then collected to monitor the amount of substitution over time.

Outreach

- Each of the health insurance companies under contract provides a range of outreach activities. Outreach activities include canvassing local businesses, day care centers, school districts, hospitals, providers, legislative offices, religious organizations and churches, social service agencies, unions, and civic groups.
- The Department of Insurance coordinates with the Department of Public Welfare and Department of Health on various outreach activities, including a toll-free telephone help line and community-based outreach grants.

Coordination between Medicaid and SCHIP

- PA CHIP managed care contractors and local Medicaid offices accept applications for the SCHIP program. If the application is sent to a managed care contractor, the contractor first screens applicants for potential Medicaid eligibility. If the applicant appears to be Medicaid eligible, the managed care contractor forwards the application to the appropriate Medicaid eligibility office and notifies the family that the application has been forwarded. If the application is sent to a local Medicaid office, the office first determines Medicaid eligibility. If the application is denied for Medicaid, the Medicaid office forwards the application to a PA CHIP managed care contractor to have the

applicant's eligibility determined for SCHIP. Families are also notified in this instance that they have been denied for Medicaid but that their application has been forwarded to PA CHIP.

- Eligibility criteria for Medicaid and PA CHIP are comparable in order to simplify the screening process. There are also several official versions of an application for health care benefits that can be used for determination of eligibility for either PA CHIP or Medicaid, including a common application form for both programs.

Financial Information

Enhanced Federal Matching Rate - FY 2003 68.28%

FFY 2003

State Share -- \$57,103,799

Federal -- \$122,920,788

Total -- \$180,024,587

Last updated: September 19, 2002